



# **Families Living Together (FLT)**

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**Institute for Health and Recovery**

**Integrated Care for Homeless Families:  
Reports from Two IHR Homeless Projects**

**December 2, 2009**

*Institute for Health and Recovery*



## Families Living Together

- **5-year** CSAT funded Homeless Treatment Grant (2004-2009)
- Serves at least **260 women** over a five-year period
- Services: Substance Use Disorders/Co-Occurring Disorders/ Mental Health and Trauma
  - Outreach, screening, engagement, assessment, treatment, care coordination
- Evaluated by Advocates for Human Potential (AHP)



# Populations Served

- Homeless women struggling with Substance Use Disorders (SUD)/Co-Occurring Disorders (COD)
  - Many parents with Mental Health (MH) and trauma issues
  - Many young parents who are at risk
- Homeless pregnant women
- Women temporarily housed in Department of Housing and Community Development (DHCD)-funded shelters
- Families temporarily housed in DHCD-funded scattered sites



# Families Living Together

**FLT is:**

- Family focused
- Evidence-based
- Consumer directed
- Trauma informed
- Culturally relevant
- Strength-based
- Relationship valuing





# Families Living Together

FLT is an Integrated Clinical Care Coordination model which expands and strengthens the family's ability to access treatment and integrates evidence-based procedures into shelter settings. These procedures include:

- Motivational Interviewing
- Integrated Dual Diagnosis Treatment and Family Care Coordination
- The Nurturing Program for Families in Substance Abuse Treatment and Recovery
- Seeking Safety
- Recovery-focused Pre-Vocational groups
- The WELL Child curriculum



# Motivational Interviewing

- Provide evidence-based practices of Motivational Interviewing (MI)
  - Express empathy
  - Develop discrepancy
  - Roll with resistance
  - Support self-efficacy
- FLT focused on strengths and competencies of each woman so she could become a leader in her own service plan and personal progress
- Provided MI training to shelter staff



## Seeking Safety

- Cognitive-behavioral integrated trauma-substance abuse recovery group that provides women with specific strategies and tools to promote physical and emotional safety
- Provides specific tools to avoid/prevent relapse both from substance use and mental health issues and trauma
- FLT staff trained shelter staff as co-facilitators of Seeking Safety groups



## **The Nurturing Program for Families in Substance Abuse Treatment and Recovery**

- The NP parenting group model is a well established, evidence-based parenting intervention
- Cognitive-behavioral model that encourages women to explore similarities between the ways they were parented and the ways they are currently parenting
- Training on NP was provided to shelter staff in a train-the-trainer model
- Groups were co-facilitated by the FLT Parent-Child Specialist and a shelter case manager



## Working with MHSA

- Provided training on SUDs/CODs to MHSA staff
- MHSA included FLT in weekly staff meetings to review clients
- MHSA Clinical Director and FLT Project Director participated in weekly meetings since project inception
- MHSA case managers and FLT staff strategize



## Working with MHSA

- FLT supports women by providing:
  - Childcare during FLT groups
  - Transportation to appointments
  - Taxi vouchers to AA/NA meetings, mental/physical health appointments
  - Pre-vocational/vocational support





## Working with MHSA

- **Creation of the Substance Use contracts**
  - Clients identified by MHSA staff to FLT
  - FCC assists the woman in understanding her substance use within context of her life
  - Referrals to SU treatment, AA/NA meetings and mental health treatment
  - Referrals to FLT groups offered at the shelter
  - Weekly meetings with FCC



# Why Do Outreach and Engagement?

- Impact of SUD/COD on family and housing stability
- Need for early identification of substance use disorders and masked co-occurring disorders
- Intersection of SUD/COD and violence/trauma
- Identification of local SUD/COD/DV resources and admission criteria/procedures
- Need for in-house treatment for women, families and their children



## Follow-Up

- FCCs engage project participants for up to 24 months after discharge from shelter
- FCCs meet women at any safe location and maintain frequent phone contact and involvement with participants' network of service providers
- FCCs work collaboratively with women to contact and locate new service providers, if needed



# Thank You

- We thank Middlesex Human Service Agency for the privilege of working with you for the last five years.
- We thank the residents of MHSA who allowed us to work with you.
- I personally want to thank Giselle Sears, the Clinical Supervisor of MHSA. You are a valued colleague and friend.
- Thank you to the Family Care Coordinators of FLT.



## **FLT Staff**

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